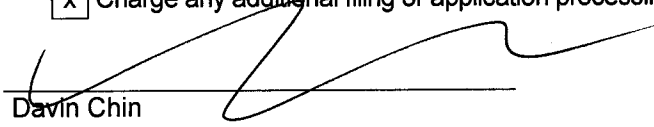


| | | | | | |
|--|---|---|-----------------------------------|----------------------------------|--------------------|
| AMENDMENT TRANSMITTAL LETTER | | | Docket No. 320529447US4 | | |
| Application No. 10/770,353-Conf. #7666 | Filing Date February 2, 2004 | Examiner J. M. Winter | Art Unit 3685 | | |
| Applicant(s): Ganapathy Krishnan et al. | | | | | |
| Invention: METHOD AND SYSTEM FOR SECURELY INCORPORATING ELECTRONIC INFORMATION INTO AN ONLINE PURCHASING APPLICATION | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 54 | - 30 = | 24 | x 52.00 | 1,248.00 |
| Independent Claims | 11 | - 4 = | 7 | x 220.00 | 1,540.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): Request for Continued Examination Extension for response within fourth month | | | | | 810.00 1,730.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 5,328.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Payment by EFT Account No. SEA1PIRM in the amount of \$5,328.00 is hereby authorized. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-0665</u> as described below. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
|  Davin Chin Attorney/Agent Reg. No.: 58,413 | | | | Dated: <u>September 18, 2009</u> | |
| PERKINS COIE LLP P.O. Box 1247 Seattle, Washington 98111-1247 (206) 359-8000 | | | | | |